

CA20N
XC 2
-64A322

problem: prevent the degenerative diseases of old age as long as possible and let the oldsters keep occupied in their own homes and with their own families.

Although it was agreed in many briefs that most old people are capable of looking after themselves, it was also generally agreed they all need some outside care and supervision. If, for example, our Miss Nel could be assured that illness would

Give Life
St. Catharines Standard
Senior Citizens' Week in Ontario is June 6-12, a time during which the residents of this province are urged to pay tribute to all senior citizens and to demonstrate their firm conviction that our older citizens are important to Ontario and the nation. This is a special week, but the hope is that it will be extended throughout the year.

Just prior to this special week, the select committee of the Legislature presented an interim report on its study and review of the circumstances of the aged. One of the most important conclusions reached in our opinion is that the

Aged Groups
In Journal Sept. 23/65
Convening

Mayor Saul Laskin has called a meeting of senior citizens' groups in Port Arthur to discuss problems of aging. The meeting follows on the heels of an Ontario government select committee hearing on aging held last week. A convention of the Ontario Association of Homes for the Aged was also held last week here.

Members of the Old Age Pensioners' Association, Friendship Club and Sunshine Club were to gather in the Benger Block this afternoon. Other contributions in the whole field of gerontology, a proposed "Institute of Gerontology" which would give precedence to research and training. Suggested also, was the

MEDICAL SCIENCE is increasing in efficiency at a rate which is taxing the social organization of the community. The world has come successful. At the same time, the medical science is the script.



The latter problem is the one which Ontario's Legislative Select Committee on aging is studying. The brief presented by the Ontario Department of

COMMITTEE ON AGING

June 2/65
value of extending training courses for adjutants and their services, to restore communications in the elderly, particularly post-stroke victims. Strict standards for nursing homes were also recommended, and wide-spread public education regarding safety and the vulnerability of persons to a **Select Committee** to **Seek Opinions** on **Senior Citizens** Sept. 22/65.

The Ontario Legislature's Select Committee on Aging will be in Sudbury Friday to discuss a provision for the welfare of senior citizens. Chairman Alex Carruthers, MPP, Durham, and committee members will convene sessions in the executive suite of the President Motor Hotel, from 9 a.m. to 5 p.m. Similar sessions have been held in various Ontario centres including the Lakehead, Kirkland Lake, and on the North Bay in an effort to study aging problems.

One of the Senior citizens throughout the night city and district have been advised of the forthcoming meeting and are invited to attend the sessions to discuss mutual problems. Representatives of the Soutar Senior Citizens Club and residents at Pioneer Manor will be in attendance as well as other interested elderly residents. The work of the select committee is one not merely to show society the years have been added to the life of our senior citizens, but rather more important, how to add those years.

problem. With more people outliving their active days and a change in our society which makes it more difficult to keep elderly people in the homes of their families, the nursing home is playing an increasingly important role.

One of the most poignant parts of the brief was the reference to "loneliness and intellectual malnutrition" of the aged. This underlines the unfortunate fact that while society may be prolonging the lives of older people, it has not discovered any real purpose for so doing. Pensions and similar measures are all very well, as far as they go, but don't wholly solve the problem.

We can be grateful for the added years which medical science has bestowed, but it is up to us, individually and collectively, to make sure that these years are as full and satisfying as possible.

Training for a happy old age should begin in grade school or earlier, representatives of the Ontario division of the Canadian Mental Health Association told a legislative committee yesterday.

BY ERIC DENT
The hardest task set by the 1964 Ontario Legislature was doled out on the last day of the session. On May 8, Premier John Robarts appointed the Select Committee on Aging.

The terms of reference were broad: to inquire into the problems inherent in the field of aging, examine all government and non-government programs and policies affecting old persons, including those in employment, income, housing and health, and establish what facilities are needed to aid old persons to fulfill a satisfying role in society.

The Ontario body, the select committee engaged such a study in the province between 60 and 70 years says the on persons it difficultly home up most old age accommodations in the province on aging, to be held on Wednesday in a brief submitted on behalf of the Lakehead District Planning Council. The brief contains findings of this special

Housing Needs For Aged Groups
Sept. 17/65

Since high rents here gobble up most of the income of the aged and in some cases no pension is required, the need for this accommodation is self-evident. The brief submitted to the select committee by Mrs. R. Purcell, on behalf of the Lakehead District Planning Council, contains findings of this special

2ND INTERIM REPORT
1966
The committee also recommended that a more workable adult program be directed toward the aged, and that the community be asked to provide more support for the aged.

ALEX CARRUTHERS (Durham) • CHAIRMAN

~~LEGISLATIVE ASSEMBLY~~
N. DAVISON (Hamilton E.)

E. A. DUNLOP (Forest Hill)

J. R. KNOX (Lambton W.)

A. B. R. LAWRENCE (Russell)

MRS. A. PRITCHARD (Hamilton Centre)

N. WHITNEY (Prince Edward-Lennox)

LAWRENCE CRAWFORD • CONSULTANT

H. RACINE (Ottawa E.)

W. E. SANDERCOCK (Hastings W.)

J. B. TROTTER (Parkdale)

O. VILLENEUVE (Glengarry)

A. V. WALKER (Oshawa)

H. WORTON (Wellington S.)

P. J. YAKABUSKI (Renfrew S.)

[Committees]

C226N
XC 2
-64A322



ONTARIO

Legislative Assembly

Select COMMITTEE ON AGING

June, 1966.

The Honourable Members

of the

Legislative Assembly

Province of Ontario:

2ND INTERIM REPORT

Fourth Session

of the

Twenty-Seventh Legislature

INTRODUCTION

Following the tabling of our 1st Interim Report on May 31, 1965*, this Select Committee was reappointed June 22, 1965**, on motion by the Honourable John P. Robarts, Q.C., Prime Minister of Ontario, seconded by the Honourable James N. Allan, Provincial Treasurer. Terms of reference remained unchanged. And the Select Committee while sorry to lose Mr. Gordon R. Carton, M.P.P., to the new Committee on The Corporation Act, was pleased to receive Mr. Norris Whitney, M.P.P., as a Member.

For the balance of the year then the following Members of the House served on the Select Committee on Aging and the Aged:

Mr. Alex Carruthers (P.C., Durham), Chairman

Mr. N. Davison (N.D., Hamilton East)

Mr. E. A. Dunlop (P.C., Forest Hill)

Mr. J. R. Knox (P.C., Lambton West)

Mr. A. B. R. Lawrence (P.C., Russell)

Mrs. A. M. Pritchard (P.C., Hamilton Centre)

Mr. H. S. Racine (L., Ottawa East)

Mr. W. E. Sandercock (P.C., Hastings West)

Mr. J. B. Trotter (L., Parkdale)

Mr. O. F. Villeneuve (P.C., Glengarry)

Mr. A. V. Walker (P.C., Oshawa)


Mr. Norris Whitney (P.C., Prince Edward-Lennox)

Mr. H. Worton (L., Wellington South)

Mr. P. J. Yakabuski (P.C., Renfrew South)

*Legislature of Ontario Debates: Official Report, No. 111, May 31, 1965. Third Session of the Twenty-Seventh Legislature, Queen's Park, Toronto, Ontario, pp. 3397-3399.

**ibid No. 143, June 22, 1965 ----- p. 4501.



Digitized by the Internet Archive
in 2022 with funding from
University of Toronto

<https://archive.org/details/31761114666118>

RESUMED HEARINGS

Appropriately enough the first Brief which the Committee heard after resuming Public Hearings, was from the United Senior Citizens of Ontario, Incorporated. This was on June 21, 1965, a few days before the Third Session of our Legislature was officially prorogued.

Thereafter the Members met with a number of organizations and private persons both in Queen's Park and on inspection tours.

An analysis of all of the Briefs and meetings to date shows the following special interests represented (as with the subject divisions adopted by the Committee*, there is some overlapping):

| | |
|-------------------------|------------|
| Government Departments | (15.2)% |
| Provincial | 5.1 |
| Municipal | 10.1 |
| Education & Research | 12.7 |
| Voluntary Associations: | (52.0) |
| Professional | 11.6 |
| Direct Health | 11.4 |
| Senior Citizens | 8.5 |
| Social Service | 7.7 |
| Ethnic | 2.7 |
| Labour | 2.7 |
| Other | 7.4 |
| Private Citizens | 9.3 |
| Religious Organizations | 9.2 |
| Indian Chiefs & Groups | <u>1.6</u> |
| | 100.0 |

* Ontario Legislative Assembly, Select Committee on Aging '1st Interim Report'. Room 3527, Parliament Buildings, Queen's Park, Toronto. May, 1965. p. 3 & p. 8.

In connection with this tabulation which reveals that more than two-thirds of all our representations were from private, voluntary groups, with only about one-third from government or quasi-government organizations, the Committee notes with interest that the bulk of expenditures for the aged are from government sources. The Minister of Public Welfare, in his Brief to the Committee, estimated that for the fiscal year 1965-66, some \$415 million was being 'made available to, or on behalf of, elderly persons across Ontario from government sources'*.

The involvement and concern of voluntary groups and private citizens is, however, gratifying. While government funds are essential in maintenance programs and the provision of specialized services, the day to day personal services are best rendered at the local community level. If anything, this Committee would have preferred to have seen even more activities being carried out by these and similar voluntary groups.

There is no doubt but that some over-all direction is essential, and it is for this reason that the Committee welcomed the announcement of a special Ontario Office on Aging, comparable to the state agencies of this type which have developed in the United States. This Office should function as a clearing-house and "H.Q. -- Planning," for the numerous different agencies, both public and private, which seek to work in the field of aging.

* This includes, as the Department's Brief recognized, economic transfer payments which do 'not reflect true need on the part of the recipients'. Since these discussions ended the Senate of Canada Special Committee on Aging has recommended a Federal guaranteed income program for the aged which would appear to distribute funds of this type more equitably than the present Old Age Security Pension.

Two key factors will determine the modus operandi of the Office on Aging, or any Institute or Commission which may succeed it. Aging is a relative concept spanning more than the traditional and chronological "three score years and ten," and the aged themselves are as heterogeneous a group as our total population. Another reason is that the various agencies, public and private, already possess certain powers and interests, are autonomous in certain respects, and tend to formulate policies in relative isolation. These two factors require that the Ontario Office on Aging display a flexible and sensible attitude; and that while its official status must be recognized, the Office on Aging should mainly encourage co-operation and understanding of broad common aims as well as the most effective methods for smaller organizations to achieve their more restricted objectives.

The Committee is of the opinion that combined public and private programs -- or at least programs developed and operated in a spirit of understanding, are essential; with an actual expansion of the work of many voluntary and religious agencies, but with Provincial leadership and encouragement, and full responsibility at the Provincial level for more basic research in the biological and social sciences. Program co-ordination, research and training: these three must be the principal functions of our Ontario Office on Aging.

LEVELS OF CARE

While it is true that the majority of older persons are independent and well, a minority of the aged (perhaps 5 per cent) do in turn constitute a large proportion of those who are infirm and ill in our society. In many of the long-term care facilities the Committee visited it was the older age group which posed the most serious problems.

Each hospital for the chronically ill and special care home represented a small society cut off from the main stream of social activity. But in each different facility there were different opportunities for self fulfilment depending on the individual patient or resident's own situation. For this reason proper placement and ease of transfer between facilities is of great importance.

The Select Committee was impressed by the statements made by two civil service physicians and would suggest that their assessment policies be adopted wherever possible. They follow as Diagrams 1 and 2.

The Select Committee would also recommend for further study and adaptation, the medical assessment form which follows as Diagram 3 and which was devised by the Geriatric Advisory Group in the Department of Public Welfare.

DIAGRAM I

Step 1 - Diagnosis
(Consider Medical Factors only)

(Domiciliary Care Groups)

Conditions Which Make Care and Supervision Necessary

(Hospital Groups)

Medical Problems Requiring Treatment

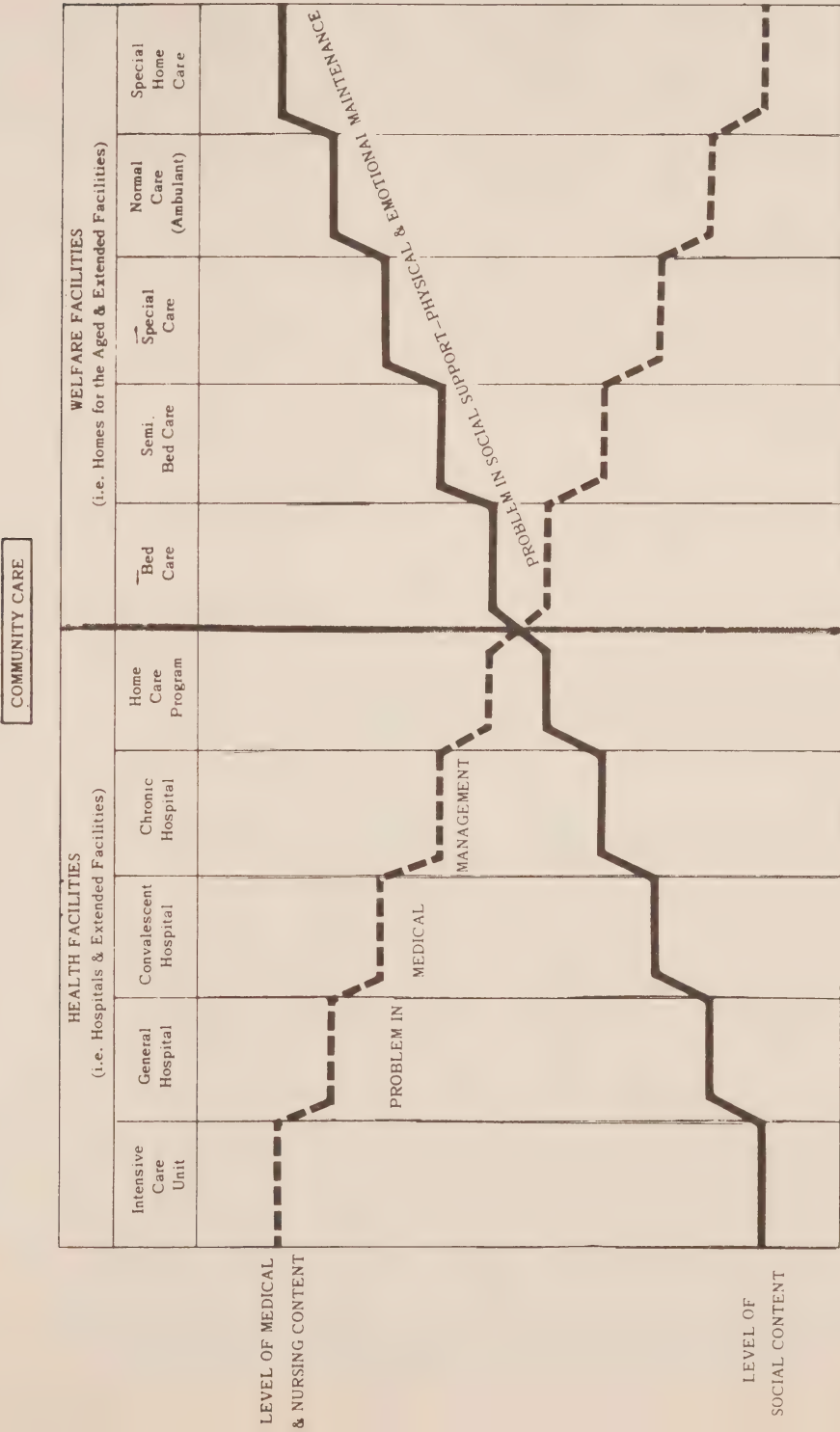
| Step 2 - Plan for Care (Consider all factors) | | Step 2 - Plan of Treatment (Consider all factors) | |
|---|--|---|---|
| Patient at Home | Institutional Care (Non-Hospital) | Patient at Home | Institutional Care (Hospital) |
| <ul style="list-style-type: none"> - Help of family - Visiting Nurse - Visiting homemaker - Organized home care plans - Other community services | <ul style="list-style-type: none"> - Home for Aged - Charitable Institutions - Nursing home | <ul style="list-style-type: none"> - Help of family - Visiting nurse - Visiting homemaker - Out-patient facilities - Organized home care plans - Other community services | <ul style="list-style-type: none"> - Active treatment - Convalescent care - Chronic care - Temporarily approved nursing homes |

Decision Hospital Care Medically Necessary

DIFFERENTIATION REQUIRES EVALUATION ON

1. Potential for rehabilitation
2. Activity of disease process
3. Potential for change.

DIAGRAM 2.



ASSESSMENT FORM *

DIAGRAM 3.



Department of Public Welfare
Homes for the Aged Branch

REPORT OF APPLICANT'S PERSONAL PHYSICIAN

| | | |
|--|-----|-----|
| Name of Patient | Age | Sex |
| Address | | |
| If in an Institution (Name and City or Town) | | |
| Family Physician | | |

1. DIAGNOSIS

- (1) _____
(2) _____
(3) _____
(4) _____

| weeks | Duration | |
|-------|----------|-------|
| | months | years |
| | | |
| | | |
| | | |

2. BRIEF MEDICAL HISTORY:

3. DESCRIBE PATIENT'S PRESENT CONDITION:

4. LIST PRESENT MEDICATION OR TREATMENT

- a) _____
b) _____
c) _____
d) _____

| Dosage or Procedure | Date Ordered |
|---------------------|--------------|
| | |
| | |
| | |
| | |

5. WHAT FURTHER TREATMENT SHOULD PATIENT RECEIVE, IF ANY:

6. SKIN - Does examination reveal any evidence of abrasions, rash, bruises, ulcerations, or abnormality? Yes ☐ No ☐
If yes, explain _____

7. Approximate weight _____ lbs. Well nourished ☐
Undernourished ☐ Overweight ☐

8. MENTAL CONDITION - Check most appropriate category

1. Approximately normal ☐
2. Occasional brief periods of confusion and/or forgetfulness ☐
3. Marked confusion and disorientation with brief periods of alertness and proper orientation ☐
4. Obvious and persistent confusion and disorientation ☐
5. Complete stagnation and vegetation of mental and emotional functions ☐
6. Mental Deficiency (a) congenital ☐
(b) acquired (organic brain damage) ☐
7. Actively psychotic with delusions and/or hallucinations or other evidence of psychosis ☐

9. USE OF LIMBS

| Arms and Hands | Right | Left | Lower Limbs | Right | Left |
|----------------|--------------------------|--------------------------|--------------|--------------------------|--------------------------|
| Normal use | <input type="checkbox"/> | <input type="checkbox"/> | Normal use | <input type="checkbox"/> | <input type="checkbox"/> |
| Impaired use | <input type="checkbox"/> | <input type="checkbox"/> | Impaired use | <input type="checkbox"/> | <input type="checkbox"/> |
| No use | <input type="checkbox"/> | <input type="checkbox"/> | No use | <input type="checkbox"/> | <input type="checkbox"/> |
| Amputation | <input type="checkbox"/> | <input type="checkbox"/> | Amputation | <input type="checkbox"/> | <input type="checkbox"/> |

10. HABITS - Check each question either Yes or No

1. Bladder control normal? ☐
2. Bowel control normal? ☐
3. Able to speak normally? ☐
4. Able to read a newspaper? ☐
5. Able to hear conversational voice? ☐
6. Able to wash face and hands? ☐
7. Able to bathe self? ☐
8. Able to use toilet facilities? ☐

11. BEHAVIOUR - Check each question either Yes or No

1. Approximately normal ☐
2. Quiet, apathetic ☐
3. Talkative ☐
4. Emotional instability ☐
5. Mind tends to wander ☐
6. Quarrelsome ☐
7. Noisy, disturbing to others? ☐

12. TECHNICS - Check each question either Yes or No

1. Indwelling catheter ☐
2. Dressings ☐
3. Prosthesis other than dentures ☐
4. Colostomy ☐
If "yes" can patient care for colostomy himself? ☐

| CHECK THE ONE MOST APPROPRIATE CATEGORY IN EACH OF THE FOLLOWING GROUPS (13 - 17). | |
|--|--|
| 13. DRESSING 1. Able to dress self <input type="checkbox"/> 2. Requires supervision or assistance in dressing <input type="checkbox"/> 3. Requires to be dressed <input type="checkbox"/> 4. Continuous full bed care <input type="checkbox"/> 14. NURSING CARE 1. None <input type="checkbox"/> 2. General personal nursing assistance and supervision <input type="checkbox"/> 3. Skilled nursing observation for active or progressive disease <input type="checkbox"/> 4. Skilled nursing procedures or sterile techniques <input type="checkbox"/> Specify 15. BED CARE 1. Requires no assistance to get in and out of bed <input type="checkbox"/> 2. Requires some assistance to get in and out of bed <input type="checkbox"/> 3. Requires lifting in and out of bed <input type="checkbox"/> 4. Requires to be turned in bed <input type="checkbox"/> | 16. FEEDING 1. Feeds self <input type="checkbox"/> 2. Requires supervision for feeding <input type="checkbox"/> 3. Requires assistance for feeding <input type="checkbox"/> 4. Requires to be fed <input type="checkbox"/> 17. AMBULATION 1. Able to walk without help (a) normal for age <input type="checkbox"/> (b) feeble, requires supervision <input type="checkbox"/> 2. Independent with wheelchair <input type="checkbox"/> 3. Requires assistance such as: (a) personal assistance to walk <input type="checkbox"/> (b) lifting in and out of chair <input type="checkbox"/> (c) unable to propel wheelchair <input type="checkbox"/> 4. Unable to do anything for self <input type="checkbox"/> Date Signature, if completed by nurse |

| CAUSE OF INFIRMITY | | | | |
|---|------------------------------|-----------------------------|---|---|
| 1. Is present need for care due primarily to aging? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | |
| 2. Is present need for care due primarily to specific disease entity(ies)? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | |
| DISEASE OR DISABILITY List in spaces A, B, C, D, in order of importance, the conditions that make care or treatment necessary at this time | | | | |
| <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> FOR EACH CONDITION LISTED IN A, B, C, D, CHECK IN THE VERTICAL PROJECTION, ONLY ONE CATEGORY (THE MOST APPROPRIATE), IN EACH OF THE FOLLOWING GROUPS </div> PROGNOSIS OF DISEASE 1. Not likely to greatly affect life span 2. Likely to show some deterioration in three months 3. Likely to be fatal in three months 4. Likely to be improved in three months | A | B | C | D |
| POTENTIAL FOR FUNCTIONAL RESTORATION (Rehabilitation) 1. None - present abilities unlikely to improve 2. Limited improvement probable - requires trial on treatment 3. Anticipate improvement to personal self-care level (may require continuing supervision) 4. Anticipate return to personal independence and participation in community life | | | | |
| PRESENT STATUS OF DISEASE OR DISABILITY 1. Stabilized or under clinical control on present regime (needs only facilities for personal care with medical supervision) 2. Mildly active (needs facilities for the care and control of a continuing medical problem. Long term treatment of disease - relief of pain and distress - progressive adjustment of therapy). 3. Unstable on present regime (needs facilities for continuous skilled care and techniques - to prevent complication - in and out of control - exacerbations and remissions). 4. Active (needs facilities for concentrated skilled observation and highly skilled techniques - frequent medical re-evaluation and immediate adjustment of therapy). | | | | |
| PURPOSE OF MEDICAL CARE 1. To maintain an infirm person in optimum health when the disease process, if any, is controlled or stabilized 2. To provide active investigation and treatment, to achieve clinical control or stabilization of disease 3. To achieve maximum personal independence through rehabilitation procedures 4. To provide palliative therapy for incurable disease | | | | |
| The statements contained herein are correct to the best of my professional knowledge. | | | | |
| Date Signature of Physician | | | | |



SPECIAL COMMUNITY STUDIES
& VOLUNTARY ASSOCIATION
INVOLVEMENT

During the tour of Northern Ontario when the Select Committee met with many civic and private groups, it became increasingly clear that information and referral services deserve top priority. In far too many instances neither the local authorities nor the Senior Citizens themselves were aware of existing services and therefore were hardly in a position to suggest new programs which might be of benefit.

It is the Committee's considered opinion that only sustained leadership can bring about constructive developments and it is to this end that the committee is seeking to continue its work in 1966-67. At the same time the Office on Aging must at once develop and expand activities and provide the necessary Provincial leadership.

In one area the Committee was impressed by Seniors' clubs utilizing a variety of available information services; such as the Provincial Department of Transport's safety campaign films for elderly persons. But in the other areas of concern, the Committee sees an increasing role for the private and professional associations. The Ontario Medical Association and local Academies of Medicine, for example, could provide invaluable leadership in geriatric care. The Ontario Association of Architects and Town Planning groups could also develop specialized advisory committees. An excellent example of another profession's possible approach can be shown in the following case history.

During the month of December 1965, one of the Members of this Committee, Mr. A. B. R. Lawrence, a lawyer by profession, organized an experimental legal clinic for elderly persons residing in or near a low rent housing

complex in the City of Ottawa. The clinic was undertaken by three Ottawa lawyers and was attended by approximately sixty aged persons, both men and women. It was convened in the central apartment building in the low rent development in the early evening.

Although most of the aged who attended had relatively low incomes, they would not normally have applied for or qualified for legal aid. In addition, it was apparent that due to physical difficulties involved in travelling and psychological difficulties involved in presenting themselves at downtown law offices, the great majority fail to avail themselves of legal services in the manner of the general public.

The clinic opened with questions and answers between the panel of lawyers and the group attending, covering the matters having no private or personal limitation. The aged then divided themselves into three groups for personal individual interviews with the lawyers present.

Nearly all of the questions, both general and individual, concerned wills and the administration of estates. Some related to Succession Duties, debts, and bankruptcy. As such, the subjects raised differed greatly from those generally found at legal aid clinics.

Both the lawyers and the aged found the clinic useful and rewarding and the desire was expressed to repeat it several times each year.

The Committee believes that similar projects can be readily undertaken in other areas, or at the very least that professional associations can become partners with the Office on Aging in developing similar services or demonstration projects.

SPECIAL TOURS

Prior to the 4,000-odd mile journey across Northern Ontario, the Select Committee met with various authorities in Washington, D.C.. Of major interest were discussions with senior legislators in the United States Congress -- the U.S. Senators on the Special Committee on Aging. Discussions ranged over a wide series of subjects from health to housing and social security. The Committee received an overall picture of U.S. developments that took in neighbouring States (like New York, Michigan, Ohio and Minnesota), and States with entirely different populations and economies (Florida, Colorado, California).

Members of the Select Committee, Staff, and those of the Advisory Committee on Geriatric Studies who accompanied them to Washington*, wish to express their special appreciation to Hon. Carl Albert, M.C. (Oklahoma) Majority Leader, House of Representatives, Congress of the United States; Hon. George A. Smathers, U.S. Senator (Florida), Chairman, Special Committee on Aging, United States Senate; and Dr. Clark Tibbitts, Deputy Director, U.S. Office of Aging, for their help and hospitality.

* Mr. Carl Cannon, Drs. R. C. Laird, M. Spooner & W. W. Priddle (Chairman).

After enjoying the vantage point of policy and program development at a federal level (which is perhaps closer to our own Provincial level in terms of responsibilities assigned under the British North America Act), on the Northern Ontario trip the Select Committee inspected the effects of program administration and saw, or heard of, services in operation at the local level. Perhaps a few quotations from the Minutes of the Northern Ontario tour will illustrate the Committee's basic activities and findings.

"Sault Ste. Marie:

"At 2:30 p.m. the Senior Citizens Ladies' Club met with the Committee. ...

"The President stated that the main project of their Club at present was to get a 'Drop-In Centre'. They were in accord with the request for Old Age Security to be increased to \$100.00 a month, and relief from the School Tax. The President's personal feelings in regard to School Tax having only been organized a year, had no community projects and had been using as a meeting place the facilities of a local church. Now they would like to establish their own Centre. They are aware that senior citizen's housing is a very essential need. Mrs. Pritchard, M.P.P. explained the operation of the Ontario Housing Corporation and how application for development is made through the Municipality. The present Ontario Housing Corporation project in the Soo is for 20 units. Also, information concerning application for Supplementary Pension was given the group.

"The matter of available nursing homes in the area came up. The Nursing Home, privately owned, is about the only available service of this kind, the rates being \$7.00 per day for a short stay, and for prolonged periods, \$12.50 per day. The only other place for needy patients to go would be the Davey Home for the Aged. Some people have tried to establish nursing homes here but there are rules and regulations that prevent getting such homes going. ...

"A Committee Consultant spoke, giving a clear explanation of Old Age Assistance and Old Age Security ... how they are applied for, who may qualify and what is provided, etc..

"Representatives of the City Welfare Department were introduced.
...

Sault Ste Marie: (Cont.)

"Recommendations were made to the Senior Citizens' groups that a liaison between City Welfare Department and themselves be established, or that speakers be invited to the Senior Citizens' Club in order to break down misunderstandings, lack of knowledge of what is available for aged people and to give information that would enlighten the citizens."

"Port Arthur:

"Brief Presented by Port Arthur Pensioners' and Senior Citizens' Association....

"The 1961 Census showed over 5,000 residents 60 years and over. We have 160 members who pay \$1.00 per year. Our meetings are held through the generosity of the Italian Benevolent Society in the Italian Hall, South Algoma St. the second Wednesday of each month, except July and August. After the business session, bingo or a social hour is enjoyed with refreshments served. Thanksgiving, Christmas and Easter a hot meal is served with all the trimmings. July meeting is in the form of a picnic; we hire buses and cars to take the group (104) to Kakabeka Falls, where the afternoon is spent in games or enjoying the scenery. At 4:30 p.m. all are taken to the Canadian Legion Hall, where the Ladies' Auxiliary serves us a cold plate supper, and all are ready to enjoy it. No further charge to the members.

Medical Expenses

"One request is Doctors' fees and drug prices. Anyone who has only the Old Age Security pension is not able to pay these exorbitant prices. It is no wonder we ask and look forward to receiving \$100.00 per month....

Day Centre

"A multi-purpose building, ground floor, no stairs, where we can hold our meetings, and centrally located near all city bus lines. No cost to pensioners or Senior Citizens as we have no funds to furnish or maintain the upkeep. A place where we can go and rest after shopping or other business; chat with friends, etc. Many old folks live in one room and they have no place except the City street benches in all kinds of weather."

Both of these items relate to meetings in urban centres in the Northland. After Kenora, adverse weather conditions prevented the Committee Members and Staff from flying in Ontario Department of Lands and Forests Otter planes to Kapuskasing and Moosonee in accordance with the schedule. Instead the

Port Arthur: (Cont.)

group returned to Fort William by plane and then took the railroad to North Bay.

Some idea of the more hazardous conditions are apparent in the following letter -- the only one of four representations from the Indian community made in writing.

"Dear Sir:

"I would like to acknowledge of your letter of Sept. 13, 1965, and I would like to express my thanks.

"These things were two important things I would like to have discussed at the meeting. Up north here people get cold cause temperature goes down to 40 to 60 degrees (below) sometimes. That's why I feel that we should look for a way, to see if something could be done for people, older people I mean, the ones that can't trap or fish any more. Cause by the time they're old enough to go on old age pension, they're ready to die. They only have it two or three years, then they die. I guess it's the cold that does that too. Pretty near all the old people have arthritis or something that have to do with the cold. They have it on their legs, then they can't work any more ... So is there any way that we can do to help these people before they reach where they're able to get pensions? They can't work outside in winter cause of the cold and there is no light work that is to be had nor any kind of work to be done inside. The people earn their keep by trapping in the winter and fishing by summer.

"Second thing is: with the people (old aged) that can't get wood for themselves or can't look after themselves. I would like to suggest a house to be built here in Sandy Lake --- like sort of a home for old people. But not only for people that are from here, if it's possible to do that, then older people could get here from various reserves, like from Trout Lake, or Bearskin Lake and Pikangikum, Poplar Hill, Deer Lake. There are lots of old aged people around that could come here if a home could be built for them. Like for instance if an old aged woman or man goes to a home in a town or city and won't be able to come home he gets lonely and dies of loneliness. I've heard of that. So that's why this way doesn't work. Then also they could go home to visit for awhile of the shorter distance if it was built here.

"These are two things that I would like to be discussed further.

"This will be all.

Yours truly,

Sandy Lake, Ont.
Via Favourable Lake, Ont.
September 25, 1965.

Thomas Fiddler,
(Chief) "

A number of witnesses travelled great distances to meet the Committee. When the Tour reached Timmins a presentation was made by a spokesman for the Town of Kapuskasing:

"Timmins:

"Presentation from Town of Kapuskasing ...

"This submission is presented on the basis of the needs and requirements of elderly persons in the vicinity of Kapuskasing, typified no doubt by all of the District of Cochrane, as determined by discussions from time to time with elderly persons and those agencies associated with the needs of the elderly ...

Economics

"Federal assistance in the form of Old Age Assistance through the Province and Old Age Security is presently payable on a standard basis of \$75.00 per person per month. We submit that there are two failings of the present system:

"(a) Whereas \$75.00 per month may be adequate payment in certain areas of the Dominion, there are substantial differences in the cost of living throughout the country and adjustments in payment should be made for this fact. This part of Northern Ontario with its transportation costs, distance from markets, weather conditions, requiring longer than average home heating and generally high rates of pay produces probably as high a cost of living as is encountered anywhere in Canada.

"If payment was made with a base of \$75.00 per month with additional payment in various cost of living zones, perhaps using the D.B.S. Cost of Living Index Zones, the proper equality would be established.

"(b) The Federal assistance is payable to each member of a family when that particular member becomes eligible resulting in the situation where one member of a family unit receives said Federal assistance unless Provincial welfare is applied for --- which often is not done, and if done, at a lesser amount. A better and guaranteed economic solution would be that in the case of family units, family assistance be given on the same basis as Provincial welfare, so that once one member of a family becomes eligible for Federal assistance, the whole family unit is provided for. Arrangements could be made if necessary for the proper allocation of costs between the various "levels of government. This would

Timmins: (Cont.)

also have the effect of removing the disparity between Federal assistance and Provincial welfare assistance, as at present a person under 65 receives less than a person over 65 on Federal assistance.

"Assistance should be provided to persons on welfare for the purchase of drugs, presently for which no grants are available. Elderly persons are the ones that require medication and allowance should be made for any form of medication that is prescribed by a physician. ...

"The main source of complaint that is heard is that persons requesting assistance feel that they are put in the position of "begging", which of course is not actually so, or that they cannot receive the proper direction on where to apply for the particular assistance as the three government agencies could get involved. It would be desirable if some type of district welfare organization could be established or some modification of same, where one welfare officer acting on behalf of all governments could give all the necessary answers, and thereby save waiting time for recipients and costs to municipalities as the interim answer is always municipal welfare.

Housing

"At present housing for the elderly locally is completely inadequate, but is in the process of being rectified with plans underway for the erection of a district Home for the Aged and a proposal made to construct Senior Citizens' housing. This when completed, will still not be the complete answer for this area. A large proportion of the elderly persons in this area are retired or physically incapacitated bushworkers or labourers, who do not desire to become residents of Homes for the Aged. Perhaps accomodation in the form of family or "small camp" atmosphere could be established taking care of units of 5 or 6 such persons to provide the freedom that they are used to.

Social Aspects

"Older persons that retire or are on welfare usually are physically unable to carry out the type of work that they were originally trained for, but in most cases it is necessary for them to supplement their income, with some earnings and it is also necessary for them to be occupied at some type of work to sustain general interest and health.

"It would be desirable if work of a part-time nature could be secured for such persons at perhaps a minimum wage so that it would be economically feasible for the employer. It may perhaps be necessary to request employers where such persons were previously employed to carry such workers at some light type duties until they are physically incapable of working.

Timmins: (Cont.)

"The Federal incentive scheme proposed one year ago to hire older persons was unsuccessful because it entailed too much "red tape" for the employer.

"General education of the people at large is necessary while they are approaching the 65 year old bracket, but this must be accomplished at the local level -- employer/employee -- pointing out the future from age 55 on."

Perhaps the largest attendance of any on the Northern Tour occurred when the Committee reached North Bay. The Mayor, Aldermen, Reeves from adjacent areas, the clergy, welfare officials, and 4 Senior Citizens' Clubs were present. The Minutes read as follows:

"North Bay:

"Members of the Golden Age Club Inc. of North Bay paraded to the Empire Hotel where Public Hearings were held, bearing placards with slogans such as the following:

"WE GAVE YOU AN HONEST DAY'S WORK
GIVE US A DECENT DAY'S LIVING

"The meeting was opened by Chairman Carruthers, with an expression of pleasure at the opportunity of visiting the area of Nipissing and North Bay, followed by an outline of the tour, the Committee's purpose and its Terms of Reference.

"Mr. Richard Smith, newly elected representative to the Ontario Legislature for Nipissing Riding, was present and formally recognized.

"The first Brief presented was that from the Golden Age Club of North Bay. ...

"It gives us all great pleasure to WELCOME you to Northern Ontario and to the City of North Bay. We sincerely hope your visit to our area will be pleasant and productive to your Committee.

"The North Bay Golden Age Club was formed on October 22nd, 1961, with 22 members meeting in a private home. Within two months, the club had outgrown the private home and was forced to seek more suitable meeting quarters. This proved extremely difficult as suitable halls, etc. were already filled. Finally, we were fortunate enough to be taken in by the 406 Wing, which is a retired Air Force Club. The club still operates from these quarters for which it pays a weekly rent of \$5.00 per meeting of two and one half hours once per week. The club meets every Thursday, 1:30 to 4:30 P.M.

North Bay: (Cont.)

"The club now has 240 members, publishes its own monthly bulletin, and is known as one of the most active clubs in the city, and one of the most active Senior Citizens' clubs in Ontario. The club is the only Senior Citizens' club in the Province having its own club dress which comprises of gold shirts, grey trousers or skirts worn with black ties, also club crest. These are worn to club meetings, public outings, bowling, of which we have seven teams, etc. Many members also have old-fashioned costumes which are worn on special occasions, parades, etc.

"At its inception the club set its objective as a Social and Recreational Centre for Elder Citizens. This we are well experienced to realize is badly needed in our city. Meeting in small quarters once a week does not begin to meet the needs of our club or what can and should be done for Elder Citizens, in the way of providing a suitable social and recreational outlet. By the end of 1965 it is expected we will have \$6,000 in the club building fund. This, plus operational expenses of approximately \$1,500 to \$1,800 per year. Under present conditions the club has an earning capacity of approximately \$3,500 per year.

"The club is entirely self-supporting, receiving no financial support from any other source whatever, is not connected with the Local Recreation Council.

"Yearly dues are now \$2.00 per year. This includes a year's subscription to the club bulletin mailed to the members. The club receives a 15% discount on all medical needs which is not only a much needed saving to the member, but in many cases, more than returns the members' full yearly dues.

"The club has twice approached the city for land to build a Centre and twice requested setting up a grant that would assist in the building of a centre and has on all occasions been turned down. Yet our city spends many thousands of dollars per year on providing all manner of recreation, etc. for young people. However, we are continuing to raise funds with the confidence it will be some day able to acquire land and the necessary municipal grant to build.

"The club is affiliated with the UNITED SENIOR CITIZENS OF ONTARIO, INC.

"The North Bay Golden Age Club respectfully submits that in the opinion of this membership the top priority needs of the Elder Citizens, at least in our area, are in order:

1. Increased pensions to at least \$100 per month.
2. Free or greatly reduced medi-care.
3. Suitable low-cost housing.
4. A Social and Recreational Centre for Elder Citizens.
5. Reduced Municipal taxes. ...

North Bay: (Cont.)

"In concluding this brief we fully realize there are many conditions where there is room for improvement to the needs of the Elder Citizens, but in our opinion those listed here are in need of immediate action. We fail to understand the logic or policy of spending millions of dollars to bring up good citizens from our young people then to turn our backs on them and push them into the background when they reach that age where they are slowed down a bit by the process of aging. With respect, we feel that the lot of the Elder Citizen depending solely on Old Age Pensions is disgraceful to a large and prosperous country like our Canada. In this country with such an abundance for the young, surely there is a respectable place for the old. That the old who gave so much to build our country have a rightful place in all our facilities and society.

"We strongly urge some preparation for those who will all too soon be among the retired and thus unprepared, will feel lost and despondent, retreat into a feeling of uselessness and finally pass away to an early death. We feel the life span of all citizens can be greatly increased by keeping all citizens active, happy and a useful and productive part of society. We feel this life span can be realized by meeting the needs of the Elder Citizens NOW.

"Sincerely and respectfully,
"THE NORTH BAY GOLDEN AGE CLUB."

Typical of the wide-ranging discussions held throughout the Northland, are the following extracts from Minutes of the sessions in North Bay.

"...Mr. R. G. Reid, Regional Administrator, Ontario Public Welfare Department, spoke, giving information on the regulations governing what is available in assistance and invited any citizens to come in to the Office and get any information they may wish. The Senior Citizens suggested that when groups are organized the Welfare representatives should feel it their duty to go to these groups and state what they have to offer to those who may be in need, rather than leave it to the citizens to seek them out. ..."

"Mr. J. Trotter, M.P.P., commented to the effect that there are many gaps in our present system of welfare assistance -- if you have nothing you are taken care of but what about the persons who may have been able to take care of themselves to a degree and are in need of partial assistance ...?"

"In response to a question from Mr. N. Davison, M.P.P., as to whether the City of North Bay or any service clubs were doing anything in low-rental housing, the President of the Senior Citizens' Club advised that the Royal Canadian Legion has provided units near the Home for the Aged. Rent is \$42.00 for single and \$47.50 for married quarters. The Legion are "contemplating another 60 units in this area. The problem is that the people who occupy them must

have sufficient income to guarantee payment of this rent. This is a barrier to the Old Age pensioner getting into this housing accomodation.

"In explaining the Provincial grants available for housing it was pointed out that the initiative must come from the social clubs or some such organizations approaching the Council. Mr. Davison described what the City of Hamilton provided in this low rental housing scheme. Mr. Trotter complimented the Club for having come well prepared, well organized, and stated that this was the way to do things, and the way to get what you need is to "put the heat on" at all levels of government."

"Mr. N. Whitney, M.P.P., commented on the proposal for reduced Municipal taxes, referring to the overall tax problem, pointing out whereby reducing tax to one group might only result in a greater tax burden falling on one or another group. Agreed they are right in their contention but this subject needs a great deal of study. He proceeded to explain certain legislation in effect that permits the municipalities to grant tax relief under certain circumstances. A Councillor suggested that Mr. Whitney relate his opinion on this matter to the City of North Bay, as they were given exactly the opposite opinion; they were given the statement that there was no way in which they could reduce taxes. Following this, a number of the Committee Members supported Mr. Whitney's interpretation of the legislation and quoted examples of certain municipalities within their different localities as having granted some relief from taxes and how they were able to do this under the existing legislation."

"Mr. Osie Villeneuve, M.P.P., speaking very ably in French, reviewed briefly the discussions and conveyed the thanks of the Committee to those participating. French members of the sudiene expressed their pleasure at the explanation."

OTHER

The Select Committee held further meetings in the Guelph-Kitchener-Waterloo areas. Among several noteworthy agencies visited were the Welling-ton-Dufferin Health Unit and a new centre in Kitchener built under The Elderly Persons Social and Recreational Centres Act. Again the value of community tours and joint discussions was evident.

As a final visit of the year -- apart from Committee Room Hearings -- Members of the Committee attended and participated in, the special Workshop held in London on "Nursing and the Health of our Aged". Hundreds of nurses registered: all papers and sessions were of inestimable value. The Workshop was planned by the Middlesex County Chapter of the Registered Nurses' Association of Ontario, and, to the Committee, this was a further indication of what any professional group can do to stimulate awareness within its own ranks and in a given community concerning the field of aging.

Other discussions in the Committee Rooms at Queen's Park ranged over wide areas of interest illustrating that the field of aging itself is all-embrasive. Dental services and research; the role of religious denominations; pre-paid prescription drug services; death and burial; the work of a University School of Social Work in aging -- these were among the several interest areas.

One day's session in particular led to further discussions elsewhere (actually in the International Institute of Metropolitan Toronto in early 1966). On October 20, 1965, many persons attended an open forum on ethnic groups and their older citizens. This caused many leaders in different groups to consider the problems faced in old age by persons who immigrated to Canada from a different cultural background. In this, as in the open session on information services (presented by the Ontario Division of the Red Cross Society), the paramount importance of constant assessment and understanding of the problems and avail-

able resources was apparent. One of the Select Committee's achievements, as has already been stated on page 10 above, must be to create and sustain a climate of awareness in which services, both present and contemplated, may be known and utilized to the full in the local community and broader regions of Ontario.

FUTURE ACTIVITIES

Members of the Select Committee definitely intend to investigate the following areas:

Regional Studies

With increased recognition of the important role which must be played by larger units of municipal government, the Select Committee propose to hold local hearings in selected areas in order to assess available community services for the aged and to make such additional recommendations as may appear necessary for improved services in these and similar regions of Ontario. One such service would be "Geriatric Consultant Clinics".

Economic Measures

A most important study which lies ahead is undoubtedly that of income maintenance which could not be treated completely until the conclusion of Federal-Provincial consultations and the introduction by the Federal Government of the proposed Canada Assistance Plan. This latter program together with the contributory Pension Plan (and that aspect which continues the Old Age Security universal flat rate feature -- about which we have two recommendations) will have a general effect on the aging in Ontario and the other provinces of Canada.

Housing

Another and equally important area is housing on which the Ontario Housing Corporation was unable to provide a submission in 1965. This is a subject of great concern and one which must receive full consideration because, in the view of the Select Committee, the provision of adequate housing has not kept pace with need. Proper housing is of direct interest to a goodly proportion of the aged population who can live independently.

Ontario Office on Aging

The Government's announcement of a Provincial Office on Aging (pages 3 to 4 above) also raises some constructive questions. The Members of the Select Committee are familiar with over-all Federal developments in the United States of America, while the Chairman and Consultant have reviewed the activities of two state agencies on aging in New York and New Jersey. The Select Committee would consider it advisable to undertake more detailed inquiries and offer advice in this field and thereby assist the new Office on Aging through comparative evaluation studies.

In the light of these contemplated activities, Members of the Select Committee are requesting that they be allowed to continue their work in 1966.

CONCLUSIONS

Members of the Select Committee on Aging would reiterate the 10 items set forth in their First Interim Report submitted to the Legislature on May 31, 1965 (refer Appendix A). Certain of these are amplified in the recommendations which follow together with some new emphases which are added.

Care Facilities

After prolonged discussions on the subject of nursing home care and related matters in the Province of Ontario and only after considering all available evidence as well as the more than sixty different facilities visited by this Select Committee on Aging

WE THEREFORE RECOMMEND:

- 1) THAT the establishment of care facilities which cover the various levels required by ill and infirm persons be based on the position postulated by Doctors Peat and Stuart of the Ontario Hospital Services Commission and Provincial Department of Public Welfare, respectively, and this concept of care be incorporated in planning for all such facilities (see charts and comments on pages 6 to 9);
- 2) THAT studies of requirements in each region of Ontario for general, chronic, and convalescent beds be continued or initiated, particularly as these beds may be judged medically necessary for aged persons, because, in our opinion, the present formula is not satisfactory and should permit of greater flexibility;

3) THAT at the next session of the Legislature, standard setting, licensing, inspection and other procedures related to proprietary nursing homes be incorporated under one specific act of the Legislature, and the Provincial Department of Health be designated as the responsible authority;

4) THAT in the event certain supervisory procedures directly or indirectly related to proprietary nursing homes are for valid administrative reasons delegated to any local authorities whomsoever, such delegated duties be kept within bounds, and ensuring that continuous review, appeal and other controlling features be maintained at the Provincial level by the responsible authority;

5) THAT pending the enactment of specific legislation related to proprietary nursing homes, it is suggested private companies interested in this field exercise due caution with respect to capital investments;

6) THAT due to the serious financial problem we have found of elderly persons who need post-hospital extended care (unable to return to their own homes) and who are not at that stage covered under the Hospital Insurance Plan, the Province should --

- i) Extend coverage to assist aged persons to receive care for a further period of up to 30 days in approved facilities, and
- ii) Urge the Federal Government to amend the Hospital Insurance and Diagnostic Services Act (Canada) to permit extended coverage for a greater variety of short - and long-term convalescent care needs;

(Four Members of the Select Committee, Mr. N. Davison, Mr. H. S. Racine, Mr. J. B. Trotter and Mr. H. Worton, wished the recommendation revised and resolved 6) THAT ...

- i) Consider the extension of coverage to assist aged persons to be cared for until they can be returned to their own homes or be transferred to a home for the aged, and
- ii) Consider the payment of costs of all care facilities not covered by Hospital Insurance to be based on a percentage income over and above the income ceiling applicable to Old Age Assistance (Suggested percentage - 5%.)

7) THAT all care facilities in which health services are of predominant importance, be under the supervision of the Provincial Department of Health;

8) THAT, since there is insufficient data available, studies be continued or initiated of requirements in each region of Ontario for domiciliary, sheltered and foster home care, particularly as such accommodation may be judged necessary for aged persons;

9) THAT the publicly operated "rest homes" proposed by the Minister of Public Welfare, be given every consideration and support by the Legislature and the community at large since these new facilities will go a long way to meeting hitherto unmet needs and serve long-term cases requiring a measure of professional care in many more of the Province's municipalities;

10) THAT the provision of foster home care under The Homes for the Aged Act be encouraged both as to the introduction of such foster homes in all areas and increased financial support from the Province;

11) THAT all facilities which provide domiciliary, sheltered, rest and foster home care and related services, be under the supervision of the Provincial Department of Public Welfare;

Economic Measures

Notwithstanding the Federal-Provincial proposals under the Canada Assistance Plan, the Select Committee have found indications of growing need on the part of many older persons due to increases in the over-all cost of living.

WE THEREFORE RECOMMEND:

12) THAT the Province again urge the Federal Government to increase Old Age Security to \$100 a month at age 65 and THAT a cost-of-living escalator clause be applied;

(Four Members of the Select Committee, Mr. N. Davison, Mr. H. S. Racine, Mr. J. B. Trotter and Mr. H. Worton, wished the recommendations revised and resolved 12) THAT in the event the Federal Government does not agree to the increase, the Province immediately enact legislation to supplement Old Age Security payments by \$25 a month; and make an automatic payment of \$100 a month to those age 65 and over not in receipt of Old Age Security; and THAT a cost-of-living escalator clause be applied to these payments.)

13) THAT all income maintenance programs be based on a needs test rather than a means test, and be on a budgetary basis;

Home Care Services

In the field of home care type services (that is, services for the large group of aged persons who reside outside of institutions or group homes and who may require assistance) the Select Committee are of the opinion that continuing efforts should be made to extend such services.

WE THEREFORE RECOMMEND:

14) THAT municipalities be encouraged to avail themselves of Government support to develop a complex of services including hospital based home care programs, visiting nurses services and visiting homemakers services;

- 15) THAT the Province take immediate steps to increase their share of the costs to municipalities for such services, and make allowances for periodic increases in the costs;
- 16) THAT payment for these services be based on a sliding scale of income and assets because the Select Committee are concerned at the number of persons with border-line incomes who should receive partial aid;
- 17) THAT Provincial - municipal - voluntary agency co-operation be extended in this field and in the trial and evaluation of demonstration projects such as "Meals-on-Wheels", Laundry Service, Friendly Visiting, and "Telephone Chains";
- 18) THAT, while praising the work now being done in certain areas by Senior Citizens' clubs, churches and other organizations, the Province give leadership through the Office on Aging to encourage this work on a wider basis throughout Ontario;
- (Four Members of the Select Committee, Mr. N. Davison, Mr. H.S. Racine, Mr. J. B. Trotter and Mr. H. Worton, wished the recommendation revised and resolved
- 14) THAT the Visiting Nurses and Homemakers Services become a branch of the Department of Welfare;
- 15) THAT the services of this Branch be available on a 24-hour basis;
- 16) THAT payments of costs for these services be based on a percentage income over and above the income ceiling applicable to Old Age Assistance (Suggested percentage - 5%.)

Social & Recreational Activities

Social and recreational needs of aged persons are of significance in the light of changes in the work-life pattern and more leisure time that is afforded us.

WE THEREFORE RECOMMEND:

19) THAT the Province through the Office on Aging give leadership to local groups to develop sound social and recreational programs for their Senior Citizens;

20) THAT financial aid under The Elderly Persons' Social and Recreational Centres Act, 1961-1962, be increased, especially in connection with day to day operating and maintenance costs;

21) THAT management, labour and other groups recognize the need for expert advice in planning and preparation for retirement, establish a variety of counselling and educational programs in this respect, and avail themselves of the services of the Office on Aging;

Anti-Age Discrimination in Labour Force

Notwithstanding changes in the work-life pattern, which include a growing acceptance of retirement, employment needs of aging persons should be recognized. Many older men and women can and do continue to be actively employed and render valuable service and at the same time maintain their independence. Many more middle-aged persons wish to remain in the labour force as long as possible and to enjoy occupational mobility without fear of age restrictions.

WE THEREFORE RECOMMEND:

22) THAT discrimination against aging job applicants or employees be discouraged through educational programs aimed at employers and trade unions and through amendments to The Ontario Human Rights Code, 1961-62, as follows:

- i) For purposes of the Code, the word "age" be defined
as 'between forty and seventy years of age';

22) (Cont.)

- ii) Subsection 1 of section 4 of the Code be amended by inserting the word "age" in the list of categories (this would cover employment practices);
- iii) A further subsection be added so that nothing in the first subsection could prevent an employer from refusing to employ or from continuing to employ a person otherwise incapable of performing the work required, or from retiring an employee under a bona fide retirement scheme, or from varying insurance and pension coverage according to an employee's age;
- iv) Subsection 2 of section 4 of the Code be amended by inserting the word "age" in the list of categories (this would cover membership in trade unions), and
- v) A further subsection be added to the Code so that inquiries or statements as to the age of an employee or an applicant for employment be permitted for legitimate requirements -- such as a bona fide retirement scheme, occupational medicine, or other approved reasons which could be set forth in regulations;

Ontario Office on Aging

Members of the Select Committee unanimously welcome the establishment of a Provincial Office on Aging as announced by the Minister of Public Welfare in his Department's submission. We believe this Office will provide a valuable function in the co-ordination of all Provincial programs affecting our aged citizens and in the advancement of research in the field of aging.

WE THEREFORE RECOMMEND:

- 23) THAT all Provincial Departments, Commissions and Institutes and other agencies co-operate to the fullest extent possible with the new Office on Aging;
- 24) THAT the Office on Aging maintain the closest possible ties with all professional and voluntary groups and assist in the development of information, counselling and educational services (for example, through the Law Society of Upper Canada with respect to legal problems older people may encounter);
- 25) THAT the Province recognize the need for suitably trained personnel to serve the varied interests of the aged and through the Office on Aging
 - i) Co-ordinate manpower surveys on present and future requirements, and
 - ii) Accelerate training programs at various levels for such personnel;
- 26) THAT the Office on Aging be provided with sufficient funds and staff to carry out its responsibilities effectively;
- 27) THAT the work of the Office on Aging be geared to eventual integration and consolidation with the proposed Ontario Institute on Aging;
- 28) THAT the Province request the Federal Government to include with the mailing of Old Age Security cheques information regarding available services for the Aged in Ontario, providing that every new Old Age Security Pensioner receive such information with his or her first cheque;

Senior Citizens ' Week

In order that all of our citizens might be reminded of the potentialities of old age and maturity, as well as of the year round efforts of government and private agencies, and of Senior Citizens themselves,

WE THEREFORE RECOMMEND:

29) THAT the Province permit and encourage municipalities officially to proclaim and recognize a "Senior Citizens ' Week" each year commencing June, 1966.

Our Second Interim Report is respectfully submitted to the House with the prayer that the Select Committee to which is referred Aging and the Aged be reappointed with the same powers as heretofore but that the corresponding duties be enlarged to permit the said Committee to make or cause to be made studies of community activities on a regional basis in the field of aging.

(Signed by Hon. Members of the
Select Committee --
original copy tabled with the Speaker
and Clerk of the House.)

In the conclusions of the Ontario Select Committee on Aging, 1st Interim Report, May, 1965 Members of the Committee did not make specific recommendations but rather stressed ten points of definite concern:

- 1) The fact that interdisciplinary developments in the whole field of gerontology are requisite. This was brought out most forcefully at the Ontario Conference on University Education Related to Aging. (March, 1965)
- 2) A proposed Ontario "Institute of Gerontology" which would have among its objectives the co-ordination and support of all Provincial activities (but primarily research and training) in the field of aging.
- 3) The possibility of a pilot program of "Geriatric Consultant Clinics" to serve aged persons in the community.
- 4) The need to extend various services to aged persons in their own homes.
- 5) The necessity of immediate action by the Province determining standards and their enforcement in proprietary Nursing Homes -- such standards to ensure the optimum care and well-being of aged residents.
- 6) The lack of sufficient community information and counselling services for aged men and women.
- 7) The value of extending training courses for adjuvants and their services, to restore communications in the elderly, particularly post-stroke victims.

Appendix A (Cont.)

- 8) Requirements for a more concise and workable set of definitions of types of care, particularly as these affect the aged who are chronically ill.
- 9) More wide-spread public education regarding safety and the vulnerability of elderly persons to accidents of several types.
- (10) Opportunities and potentials for the greater use of mature adults to assist other and perhaps older persons to help themselves to a fuller life in the later years.

PLACES VISITED

- (1) SENIOR CITIZENS COUNCIL OF THE LAKESHORE MUNICIPALITIES, METROPOLITAN TORONTO. Members of the Committee were invited to attend Special Meeting April 25, 1965 - Survey of Aged Residents in the Area.
- (2) WASHINGTON, D. C., U.S.A. (July 19-21, 1965).

MAIN STUDY SESSIONS:

July 19, 1965 -- U.S. Department of Health, Education, and Welfare
"Federal Services and Programs in Aging", a comprehensive review.

-- U.S. Department of Health, Education, and Welfare,
Public Health Service
"Public Health Service Activities in Aging", including Gerontology Branch and National Institutes of Health-- Institute of Child Health and Human Development.

-- Canadian Embassy
Reception.

July 20, 1965 -- U.S. Department of Health, Education, and Welfare,
Welfare Administration
"Welfare Programs for Older People"

-- U.S. Housing and Home Finance Agency
"Housing Programs for Older People"

July 21, 1965 -- U.S. Department of Labor
"Employment, Retraining, etc., as Related to Older Workers."

-- U.S. Senate Special Committee on Aging

ALPHABETICAL LIST OF PERSONS WHO ASSISTED THE COMMITTEE,
WASHINGTON, D. C.

Hon. Carl Albert, M.C. (Oklahoma) Majority Leader, House of Representatives, Congress of the United States.

Hon. Gordon Allott, U.S. Senator (Colorado), Special Committee on Aging, United States Senate.

Hon. Robert M. Ball, Commissioner of Social Security.

Mr. Jules H. Berman, Chief, Division of Welfare Services, Welfare Administration.

Dr. James E. Birren, Director, Aging Program, National Institute of Child Health and Human Development.

Hon. Philip N. Brownstein, Commissioner, Federal Housing Administration.

APPENDIX B (Cont.)

WASHINGTON, D. C.

Mr. James J. Burr, Chief, Aging Services, Bureau of Family Services, Welfare Administration.

Dr. Austin B. Chinn, Chief, Gerontology Branch, Public Health Service.

Hon. Wilbur J. Cohen, Under Secretary, Department of Health, Education, and Welfare.

Mr. Moses Gozonsky, Deputy Assistant Administrator, Housing for Senior Citizens.

Dr. Donald P. Kent, Director, Office of Aging, Welfare Administration.

Hon. Marie C. McGuire, Commissioner, Public Housing Administration.

Hon. Jack Miller, U. S. Senator (Iowa), Special Committee on Aging, United States Senate.

Mr. John Guy Miller, Minority Staff Director, Special Committee on Aging, United States Senate.

Hon. Frank E. Moss, U. S. Senator (Utah), Special Committee on Aging, United States Senate.

Mr. J. William Norman, Jr., Staff Director, Special Committee on Aging, United States Senate.

Mr. M. Allen Pond, Assistant Surgeon General, Public Health Service.

Hon. Winston L. Prouty, U. S. Senator (Vermont), Special Committee on Aging, United States Senate.

Mr. Charles S. A. Ritchie, Canadian Ambassador to the United States of America.

Hon. George A. Smathers, U. S. Senator (Florida), Chairman, Special Committee on Aging, United States Senate.

Mr. Sidney Spector, Assistant Administrator, Housing for Senior Citizens.

Mr. Fred W. Steininger, Director, Bureau of Family Services, Welfare Administration.

Hon. Luther L. Terry, Surgeon General, Public Health Service.

Dr. Clark Tibbitts, Deputy Director, U. S. Office of Aging.

Hon. Robert C. Weaver, Administrator, Housing and Home Finance Agency.

Hon. Harrison A. Williams, Jr., U. S. Senator (New Jersey), Special Committee on Aging, United States Senate.

Hon. Ellen Winston, Commissioner of Welfare.

Hon. Ralph Yarborough, U. S. Senator (Texas), Special Committee on Aging, United States Senate.

APPENDIX B (Cont.)

PUBLIC HEARINGS AND INSPECTION TOUR IN NORTHERN ONTARIO.

(September 12-24, 1965). Several witnesses appeared without presenting Briefs.

(3) SAULT STE MARIE, September 13, 1965.

Briefs Presented: Family Service Bureau.
Chief Wm. Meawasige & Mrs. Meawasige.
The Senior Citizens of Greater Sault Ste Marie.
The Senior Citizens Ladies' Club.
City Welfare Department.

Facilities Visited: F. J. Davey Home for the Aged.
Group Health Unit Centre.

(4) PORT ARTHUR - FORT WILLIAM, September 14, 1965.

Briefs Presented: Recreational Director for the City of Port Arthur -
Mr. Ray Wittenburg.
His Worship, Mayor Saul Laskin. (Port Arthur)
Port Arthur Pensioners and Senior Citizens Association.
Rev. Canon Alvin J. Thomson, Algoma Diocesan
Council for Social Service.
Lakehead Social Planning Council, Mrs. E. A. Purcell,
Evergreen Club, Fort William.

Places Visited: Ontario Hospital.
Central Park Lodge.
Cumberland Hall (C.N.I.B.)
Dawson Court - Home for the Aged.
St. Joseph's Manor.
Ontario Homes for Aged Association's Convention,
Fort William.

(5) FORT FRANCES, September 17, 1965.

Briefs Presented: Ontario Indian Welfare Branch:
Mr. Johanson and Mrs. Cooper.
Fort Frances Senior Citizens Club.
Rainy River Senior Citizens Club.

Facilities Visited: Rainycrest Home.

(6) KENORA, September 18, 1965.

Briefs Presented: Mrs. R. Verhoeve, Sioux Lookout. (Letter)
Kenora Retired Men's Association.
Mrs. M. Phillips, Director of Recreation,
Town of Kenora.
Keewatin Retired Men's Association,
Ladies Auxiliary of Pinecrest Home.
Senior Citizens Club, Dryden. (Letter)
Chief Thomas Fiddler, Sandy Lake. (Letter)

APPENDIX B (cont.)

(Northern Ontario Tour continued)

(7) NEW LISKEARD, September 21, 1965.

Briefs Presented: Second Mile Club.

Facilities Visited: Northdale Manor Home. (United Church).

(8) TIMMINS, September 22, 1965 .

Briefs Presented: Corporation of the Town of Kapuskasing.
Mayor Leo Del Villano of Timmins,
Mrs. Eugene Rafuse, Townships of German,
Matheson and Cody.
Ladies Auxiliary, Golden Manor.

Facilities Visited: Golden Manor Home for the Aged.

(9) NORTH BAY, September 23, 1965.

Briefs Presented: North Bay Golden Age Club Inc., Mr. R. Babcock.
Retired Railway Men's Club, Mr. C. T. Moulder.
Department of Health & Welfare of North Bay -
Alderman Nell Mallory.
Mr. Willard Richardson, Member of Board of
Cassellholme.
Mr. C. W. Hicks, Welfare Administrator,
Township of West Ferris.
Rev. A. R. Cuyler, Priest and Member of
Diocesan Council for Social Service of the
Diocese of Algoma.

Facilities Visited: Au Chateau, Home for the Aged, Sturgeon Falls (enroute).

(10) SUDBURY, September 24, 1965.

Briefs Presented: Sudbury Senior Citizens Committee:
(Mrs.) Grace Hartman, Chairman and Deputy
Mayor of the City of Sudbury,
Mr. J. L. Lunney, Solicitor, City of Sudbury,
Mr. R. J. Bateman, City Assistant Recreational
Director.
Town of Chelmsford, Mr. A. C. Regimbal,
Clerk-Treasurer.
Sudbury & District Health Unit - Miss Florence
Tomlinson.
Mayor H. Prescott of Capreol.
Mr. Isaac Pebamash, Messrs. Debossage, representing
Chief Gus Debassige, Reservation of West Bay.
Soutar Senior Citizens Club.
Mr. H. Snyder, Administrator of the Sudbury
Memorial Hospital.
Labour Council: Mr. Gilchrist, Vice-President,
Mr. Bechard, Labour Union.
Espanola Senior Citizens Club (Letter).

Facilities Visited: Pioneer Manor Home for the Aged.

(11) GUELPH, KITCHENER-WATERLOO AREAS. (October 27029, 1965)

Briefs Presented: Guelph-Wellington Branch, Victorian Order of Nurses: Miss Mary Gibbon, Nurse Administrator, Home Care Program.

Dr. B. T. Dale, Medical Officer of Health and Director, Wellington-Dufferin Health Unit.

Facilities Visited: St. Joseph's Home for the Aged, Guelph. Elliott Home for the Aged, Guelph. Wellington-Dufferin Health Unit, Fergus. Guelph Golden Age Club, Recreation Centre. Kitchener Senior Citizens Centre.

(12) LONDON, Canada. (November 3-5, 1965).

REGISTERED NURSES ASSOCIATION OF ONTARIO - Middlesex County Chapter, Nursing Workshop: "Nursing and the Health of our Aged".



ONTARIO
LEGISLATIVE ASSEMBLY

COMMITTEE ON AGING

Appointed by the Legislature on motion of the Honourable John P. Robarts, Q.C., Prime Minister, to study the circumstances of the aged and consider all relevant subjects in the Province of Ontario.

Members of the Select Committee on Aging will make a VISIT TO NORTHERN ONTARIO IN SEPTEMBER, 1965, hold public hearings in selected centres, and see various facilities for older residents of the Northland.

All persons interested in these matters are invited to meet with the Committee, particularly elderly men and women themselves regarding their achievements and problems.

If you would like detailed terms of reference, an account of the Committee's work to date, and dates and places of the meetings in the North, please write the Consultant, Mr. Lawrence Crawford, Room 3527, Parliament Buildings, Toronto 5, Ontario.

Alex Carruthers, M.P.P.
Chairman.

APPENDIX B (Cont.)

The following letter was sent to 54 Indian Chiefs across Northern Ontario:

"Dear Chief:

You may have noticed recent advertisements in your local press regarding the mid-September visit of this Select Committee of our Provincial Legislature to Northern Ontario.

At my request Mr. S. N. Asbury, Director of Indian Welfare Services for the Ontario Department of Public Welfare, very kindly gave me your name in the event you and any members of your Band would be interested in meeting with the M.P.P.s on this Committee.

"On behalf of the Committee's Chairman, Mr. Alex Carruthers, M.P.P., I am pleased to enclose a copy of the Terms of Reference. You will note that we are interested in all aspects of the aging question and would welcome any views you might care to express.

I expect that we will be in _____ about September _____. Please let me know if you are interested in meeting with the Committee and I shall do all I can to arrange a convenient place.

With every good wish,

Yours sincerely,

Lawrence Crawford,
Consultant."

LC:cm
Encl.

APPENDIX B (Cont.)

The following letter was sent to the Presidents and Corresponding Secretaries of 34 Senior Citizens' Clubs across Northern Ontario:

"Dear _____:

You may be interested to learn that Members of this Select Committee of our Provincial Legislature will be visiting Northern Ontario in mid-September, 1965.

On June 21st we received a Brief from the United Senior Citizens of Ontario, Incorporated, and had also, in the preceding months, actually visited one independent Senior Citizens' Club together with five other locally organized social and recreational centres for elderly persons in Southern Ontario.

On behalf of the Chairman, Mr. Alex Carruthers, M.P.P., and Members, may I express the hope that you will either write the Committee of your Club's views or, if possible, meet with us informally while we are in the Northland.

I look forward to hearing from you at your earliest convenience and assure you of our interest and good wishes.

Yours sincerely,

Lawrence Crawford,
Consultant."

LC:cm.

BRIEFS PRESENTED

(This list includes Briefs heard at resumed Public Hearings beginning June 21, 1965. Two witnesses* appeared without presenting Briefs. (Proc. = Official Proceedings of the Committee.)

- Advisory Committee on Geriatric Studies. Ontario Department of Public Welfare, Supplementary Submission to 16/xii/64, read by Dr. Chas. Harris. (Proc. 12/vii/65, page 1010 ff.)
- Anglican Church of Canada. (Proc. 14/vii/65, page 1263 ff.)
- Association of Women Electors of East York. (Proc. 12/vii/65, page 1061 ff.)
- Baptist Convention of Ontario and Quebec. (Proc. 31/viii/65, page 1417 ff.)
- Canadian Highway Safety Council. (Proc. 12/vii/65, page 1079 ff.)
- Canadian Mental Health Association, Ontario Division. (Proc. 13/vii/65, page 1107 ff.)
- Canadian Red Cross Society, Ontario Division. (Proc. 18/x/65, page 1777 ff.)
- Canadian Schools of Practical Nursing. (Proc. 13/vii/65, page 1193 ff.)
- Case, Alderman*. City of Stratford. (Proc. 13/vii/65, page 1221 ff.)
- Catholic Charities Council of Canada. (Proc. 30/xi/65, page 2281 ff.)
- Chinese-Canadians. (See Ethnic Groups).
- Dental Research, Part relating to: Report of the White House Conference on Aging, January 9-12, 1961. U.S. Department of Health, Education, and Welfare. Washington 25, D.C. April, 1961. (Proc. 12/vii/65. Appendix I - I.)
- Ethnic Groups including presentations from Mr. Robert Kreem, Director of Services, International Institute of Metropolitan Toronto; Mr. Henry Weisbach, President, Central Organization of Sudeten-German Clubs in North America; Mr. Y. Yamaga, Nipponia Home for Aged Japanese-Canadians; Mon Sheong Foundation, Chinese-Canadians, Board of Directors; Mrs. E. Pasternak. Ukrainian Home for the Aged; Miss M. Caponnetto, Italian Community; Mr. Walter Lyons, Jewish Home for the Aged; Mr. S. N. Asbury, Indian Affairs, Ontario Department of Public Welfare; Mr. C. Atkinson, Supervisor of Homes for the Aged, Ontario Department of Public Welfare; Women's Council of the Czechoslovak National Association of Canada - Toronto Branch. Mrs. J. Petricek. (letter). (Proc. 20/x/65, page 1953 ff.)
- German-Sudeten Clubs. (See Ethnic Groups).
- Indian Affairs. (See Ethnic Groups).
- International Institute of Metropolitan Toronto. (See Ethnic Groups)
- Italians. (See Ethnic Groups)
- Japanese-Canadians. (See Ethnic Groups)
- Jewish Home for the Aged. (See Ethnic Groups)

APPENDIX C (cont.)

- Labour Council. Brampton & District. (Proc. 29/xi/65, page 2141 ff.)
- Labour Council. Hamilton & District. (Proc. 29/xi/65, page 2162 ff.)
- Lamoureux, Mr. R. J.* - Retired Staff, for and on behalf of Welfare Dept. of United Steel Workers of America - Canada, and Chairman, Welfare Committee, United Senior Citizens of Ontario. (Proc. 29/xi/65, page 2226 ff.)
- Ontario Department of Health. (Proc. 30/viii/65, page 1311 ff.)
- Ontario Department of Public Welfare. (Proc. 15/xii/65, page 2418 ff.)
- Ontario Department of Transport. (Proc. 1/xii/65, page 2302 ff.)
- Ontario Funeral Service Association. (Proc. 30/xi/65, page 2244 ff.)
- Ontario Hospital Association. (Proc. 14/vii/65, page 1230 ff.)
- Ontario Psychiatric Association. (Proc. 13/vii/65, page 1173 ff.)
- Ontario Welfare Council. Section on Aging. (Proc. 4/x/65, page 1543 ff.)
- Ontario Welfare Council. Nursing Homes Survey Committee.
- Continued submission from 4/x/65. (Proc. 18/x/65, page 1716 ff.)
- Presbyterian Church in Canada.
- Prescription Services, Inc. (Proc. 4/x/65, page 1489 ff.)
- Royal College of Dental Surgeons of Ontario. (Proc. 12/vii/65, page 1019 ff.)
- St. Christopher House. (See Social Planning Council of Metro. Toronto)
- School of Social Work, University of Toronto. (Proc. 30/xi/65, page 2284 ff.)
- Scott, Dr. W. G. Retired, Special Placements, National Employment Service (Ontario Division). (Proc. 5/x/65, page 1674).
- Sky, Mr. Bernard. Senior Citizens' Projects. (Proc. 22/xi/65, page 2094 ff.)
- Social Planning Council of Metropolitan Toronto, with joint appearances of Visiting Homemakers Association and St. Christopher House. (Proc. 19/x/65, page 1850 ff.)
- Social Planning Council of Hamilton and District. (Proc. 22/xi/65, page 2041 ff.)
- Stuart, Dr. C. K., Medical Director, Ontario Department of Public Welfare. Supplementary submission to 15/xii/64. (Proc. 1/ix/65, page 1455 ff.)
- Toronto Memorial Society. (Proc. 13/xii/65, page 2340 ff.)
- Ukrainians. (See Ethnic Groups)
- United Church of Canada. Additional submission to 15/xii/64. (Proc. 5/x/65, page 1616 ff.)
- United Senior Citizens of Ontario Incorporated. (Proc. 21/vi/65, page 952 ff.)
- Visiting Homemakers Project - City of Hamilton. (Proc. 13/xii/65, page 2384 ff.)
- Visiting Homemakers Project - Toronto. (See Social Planning Council of Metro. Toronto).

Persons interested in other reports from the Committee,
or in making further submissions to the Members of the Committee in 1966-67,
should write:

MR. LAWRENCE CRAWFORD,
CONSULTANT & STAFF DIRECTOR,
SELECT COMMITTEE ON AGING,
LEGISLATIVE ASSEMBLY,
PROVINCE OF ONTARIO,
ROOM 3527,
PARLIAMENT BUILDINGS,
TORONTO 5, ONTARIO, CANADA.

3 1761 1146611 8

HIYA !